



APPLICATION INSTRUCTIONS AND CHECKLISTS For LICENSED RESPIRATORY THERAPIST

General Statement:

The ASBRT desires to provide courteous and timely service to all applicants. To maximize its efficiency and the level of service, the Board will process **complete applications only**. Complete applications will be the Board's first priority. Incomplete applications will be returned to have deficiencies addressed. Read all instructions carefully. The Board will not act as your agent in gathering information or supporting documents necessary for the consideration of your application. **Make all checks payable to ASBRT and send with application to: P.O. Box 241386; Montgomery, AL 36124-1386.**

You should carefully read the ASBRT Licensure Law and the Rules and Regulations (also available on this web site) to familiarize yourself with them prior to beginning to complete the application. Please copy all forms submitted to the ASBRT for your records, as you may need some pages for future reference.

The ASBRT has been given the responsibility of protecting the public safety and welfare by regulating respiratory therapy in the State of Alabama, which is our first concern. In addition, we are striving to meet the needs of the professional respiratory therapists, who provide respiratory therapy services to the public. Therefore, we have attempted to make the rules and regulations and the application process as "user friendly" as possible. However, as you progress through the application process and, in time, the renewal process, you may have specific recommendations for improvement. We welcome suggestions and request that you mail them to our office in Montgomery.

Checklists: Checklists have been created to assist you in completing your application. Locate the checklist for the method by which you are applying for a license. The checklists will direct you to the appropriate forms to complete. The following is a list of ASBRT checklists from which you should choose:

- Licensed Respiratory Therapist (LRT) by Credential (RRT & CRT)
- LRT by Employment or Work Experience
- LRT by Reciprocity (license from another state)
- LRT by Special Training or Foreign School Education

Application: Applications must be typewritten or printed in ink and must be legible. Complete the entire application. **Leave no space blank.** If a particular question or request for information does not apply to you, put a short line in the blank space or cross out the entire section to indicate the question or section has received your attention. Failure to supply necessary information may result in denial of application.

Your full name, social security number, and date of birth are essential for identification purposes. This information will be for confidential Board use only. Please supply this key information. The preferred contact information, name, and license number may be used for publication of a roster of licensees on the Board's web site.

Application Process: Once your **complete application** with payment has been received, your application will be reviewed by the Board. You will then be notified of your status by letter.



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Forms Checklists:

Forms checklists to be completed when applying for an Alabama Respiratory Therapist license.

License by Credential (RRT, CRT) complete and submit:

- () Application with current picture attached (within last 6 months)
- () Application Fee (\$25.00)
- () License Fee (\$75.00)

License by Employment or Work Experience complete and submit:

- () Application with current picture attached (within last 6 months)
- () Verification of Employment for Respiratory License by Employment or Work Experience (must be sent directly from employer to ASBRT)
- () Application Fee (\$25.00)
- () License Fee (\$75.00)

License by Reciprocity complete and submit:

- () Application with current picture attached (within last 6 months)
- () Verification of License from another State (must be sent directly from the licensure board of the state in which you hold the license)
- () Application Fee (\$25.00)
- () License Fee (\$75.00)

License by Special Training or Foreign Education complete and submit:

- () Application with current picture attached (within last 6 months)
- () Verification of Respiratory Care Education Form and/or official verification of license from a foreign country translated into English.
- () Application Fee (\$25.00)
- () License Fee (\$75.00)

Instructions for completion of the application:

1. Personal information:

- a. Complete all sections either type written or printed legibly in blue or black ink.
- b. Attach, by clear tape or staple, a recent approximate 2x2 head and shoulders passport type photo of applicant. The photo should be current within last 6 months and have applicant's name printed on the back side of the photo.

1. Employment:

List all health related employment held in the past 3 years. Begin with current employer and include address of employer, dates of employment, position title, and employer phone number for all entries. Attach additional sheet if extra space is needed.



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2. Education:
List all educational institutions attended including graduation information. Please include GED information under "other". Attach additional sheet if extra space is needed.
3. List all respiratory and health-related licenses you currently or have ever held.
4. Criteria for Licensing – choose one, and complete requested information.
5. Self disclosure section:
 - a. Answer each question
 - b. If you answered any question "Yes", include complete explanation, date, place, reason, and disposition on a separate sheet of paper and attach to the application. A "yes" answer does not necessarily mean the applicant will not be granted a license. However, additional documentation may be requested by the Board if the information submitted is insufficient.
6. Affidavit:
Carefully read complete affidavit statement. Print your name in the blank at the beginning of the last paragraph.
7. Signature must be notarized.
8. Enclose 2 checks or money orders, one for \$75.00 license fee and one for non-refundable \$25.00 application fee made payable to ASBRT. License fee will be refunded should your license application be denied.
9. Mail completed information to: ASBRT
P.O. Box 241386
Montgomery, AL 36124-1386.

8/11/05